

REINSTATEMENT

No. W 4417 Return to: SECRETARY OF STATE 700 WEST JEFFERSON P.O. BOX 83720 BOISE, ID 83720-0080 FEE DUE Admin Cancelled 2/10/99	Annual Report Form 1. Mailing Address - Please Correct, If Not Correct REFUGE, LIMITED LIABILITY COMPANY (THE) PO BOX 404 VICTOR ID 83455	2. Registered Agent and Office NOT A P.O. BOX DREXEL B GIBSON 867 S 450 W VICTOR ID 83455 3. Organized Under the Laws of: ID W 4417																		
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors Limited Liability Companies: Enter Names and Addresses of ☒ Managers or ☐ Members (check one) <table border="1"> <thead> <tr> <th>Office Held</th> <th>Name</th> <th>Street or P.O. Address</th> <th>City</th> <th>State</th> <th>Zip</th> </tr> </thead> <tbody> <tr> <td>Owner</td> <td>Drexel B Gibson</td> <td>P.O. Box 404</td> <td>VICTOR</td> <td>ID</td> <td>83455</td> </tr> <tr> <td>owner</td> <td>Sarah E. Gibson</td> <td>P.O. Box 404</td> <td>VICTOR</td> <td>ID</td> <td>83455</td> </tr> </tbody> </table>			Office Held	Name	Street or P.O. Address	City	State	Zip	Owner	Drexel B Gibson	P.O. Box 404	VICTOR	ID	83455	owner	Sarah E. Gibson	P.O. Box 404	VICTOR	ID	83455
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Owner	Drexel B Gibson	P.O. Box 404	VICTOR	ID	83455															
owner	Sarah E. Gibson	P.O. Box 404	VICTOR	ID	83455															
5. Signature of New Registered Agent	6. Signature <u>Drexel B. Gibson</u> Date <u>7/17/99</u> Name (Typed or Printed) <u>Drexel B. Gibson</u> Title <u>owner</u>																			